

The Effect of Sahaja Yoga Meditation on Self-Esteem, Resilience and mental well-being among Young Adults

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Abstract

It is difficult to take care of oneself in today's world, but individuals can certainly take responsibility to pay attention to stress management through meditation. Sahaja Yoga Meditation is a traditional system of meditation that results in "thoughtless awareness" and peace of mind. A total sample of ninety-one young adults, both Sahaja Yoga meditators and non-meditators, was taken from various urban parts of India. The study assessed the effects of Sahaja Yoga Meditation on self-esteem, resilience, and mental well-being among the groups, using the Rosenberg Self-Esteem Scale, the Brief Resilience Scale, and the Warwick-Edinburgh Mental Well-being Scale (WEMWBS). The data was analyzed using descriptive and inferential statistics. The results of the study indicate a significant difference between the two groups regarding self-esteem, resilience, and mental well-being. Gender differences were only found to be significant in relation to self-esteem among the non-meditator group.

Key Words: Sahaja Yoga Meditation, self-esteem, resilience, mental well-being, young adults, Indian.

Introduction

Positive mental health has been garnering significant attention from various mental health professionals. A large chunk of this generation of psychological researchers is intrigued by the eastern concepts of health and wellbeing (Sinha, 2011; Peters et al., 2019). Today, young adults are sitting on a time bomb wherein stress, anxiety, depression, and many other psychological problems have occupied our living spaces. In this light, meditation has recently gained attention in various domains of the psychological research community and academia (ErdoanYüce & Muz, 2020; Jose & Angelina, 2020; Moszeik et al., 2020; Tripathi, 2020). Also, it has successfully been used as an alternative to psychotherapy in clinical and counselling spaces (Butler et al., 2008; Moodley & West, 2005). Meditation as an intervention is being curiously experimented with for positive mental-health variables as well (Lynch et al., 2018). In the 1950s the

meditation techniques of Zen Buddhism, gradually popularized in the West (Langer & Moldoveanu, 2000). It has its roots in ancient Eastern religious thoughts, such as Hinduism and Buddhism in India and Daoism in China. The school of Yoga (of Indian origin), Qi Gong, and Tai Chi (Chinese origin) are some of the examples of meditation practices (Gu, 2001). Lazar et al. (2000) examined five participants who had practiced Kundalini Meditation daily for at least four years and observed that their breathing pattern and silently repeated Sanskrit phrases during the session had a significant effect on their neural activity.

Sahaja Yoga Meditation (SYM)

Inside every human being resides a subtle system of channels (nadis) and energy centers(chakras) which look after our physical, intellectual, spiritual, and emotional beings (Morgan,1999). Each of these energy centers has spiritual qualities that start manifesting when we awaken our Kundalini power. Thus, through

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82/ The Effect of Sahaja Yoga Meditation on Self-Esteem...

practicing meditation regularly, we become dynamic, creative, confident, and at the same time humble and compassionate (Srivastava, 1997). Sahaja Yoga Meditation (SYM) is a dynamic and gentle technique that helps in unleashing the primordial energy within us called Kundalini power. It was founded by Dr. Nirmala Devi Srivastava (Shri Mataji) in India in 1970. It is a method of awakening the dormant potential of a person through an easy meditative process (Sharma et al., 2005). When the Kundalini rises, it reaches the sixth energy center (Sahasrara chakra); it brings one into a state of thoughtless awareness or mental silence. In the state of thoughtless awareness, attention is directed to the present with complete awareness of the surroundings. In Hindu thought, this meditative state is known as 'Thuriya Avastha' (Ramamurthi, 1995).

SYM is a method of meditation where the meditator is not only able to avoid initiating thoughts, as similar to mindfulness, but reaches a focused state of awareness, helping one to avoid engaging in any thought. More importantly, SYM goes a step further in eliminating the mental noise at the back of the mind (Morgan, 1999). SYM practitioners seek to expand the space between their thoughts. It is a method of meditation oriented towards a specific state of awareness that is "experience-oriented" rather than "attention-oriented" like mindfulness or "relaxation-oriented" like Transcendental Meditation (TM) (Black, 2011; Benson & Proctor, 2011).

The psychological effects of SYM have shown significant effects in the management of depressive symptoms, reducing stress in epilepsy patients, and treatment for attention deficit hyperactivity disorder (Sharma et al., 2005; Panjwani et al., 1995; Harrison et al., 2004). A systematic review by Hendrks (2014) reveals an evident role of SYM concerning the following psychological aspects: anxiety, depression, stress, negative affect, neuroticism, happiness, high quality of life, positive affect, boost in mental activity, and emotional stability. Having reviewed the articles and taking the quality of the studies into consideration, it can be inferred that SYM is associated with reduced stress in healthy adults and reduced depression in both healthy adults and adults with a depressive disorder (Henderks, 2014). SYM is also associated with a range of physiological changes such as a reduction in blood glucose level, an increase in grey matter volume, and enlargement of the right hemispheric cortical and

subcortical regions of the brain, which are responsible for sustained attention and interoceptive perception (Hernández et al., 2016). It is also proven to be effective in the treatment of asthma (Manocha et al., 2002) and in the improvement of neurocognitive functioning (Sharma et al., 2006). Studies on SYM reveal an evident effect on psychological aspects such as positive affect, negative affect, emotional stability, mental activity, and quality of life. There is a research gap when it comes to the development of positive aspects such as resilience, subjective well-being, and personal values such as forgiveness, courage, or transcendence, which needs to be addressed (Hendriks, 2014).

Young adulthood is a period that is characterized by adjustments to new ways of life and social outlook. Individuals need to embrace updated social tasks and are supposed to change their implicit and explicit psycho-social functioning accordingly. This, in turn, makes young adulthood a distinctive period in the lifespan of an individual. Unlike the previous years of their lives, young adults are presumed to incorporate these changes independently.

Because a lot of research has been generated on self-esteem as a construct, summarizing it becomes challenging. Rosenberg (1965) defines self-esteem as "a positive or negative attitude towards an object, namely oneself." Rosenberg (1965) has elaborated on the concept of "self-esteem" by introducing a sociological aspect of evaluation to it. Accordingly, self-esteem manifests itself in an individual's attitudes, perceptions, and feelings towards oneself. People who exhibit high self-esteem feel confident in their social settings. Generally, they are optimistic, uplifting, supportive of others, and have good communication skills. (Srivastava & Aggarwal, 2013). Furthermore, they are open to participation, are active, determined, and gain by learning from their past errors. These characteristics give them the courage and flexibility to take charge of their lives and learn from their mistakes without fear (Cutler, 1995). On the other hand, people who have low self-esteem are more likely to feel awkward, shy, and conspicuous. They are unable to communicate or express themselves sufficiently as compared to people who have high self-esteem. Low self-esteem is associated with certain unpleasant or painful emotional experiences that are now termed "psychological distress". According to Mirowsky and

Ross (2003), psychological distress is indicated by unpleasant affective states of depression and anxiety that have both emotional and physiological expressions (Rosenberg & Owen, 2001). Self-esteem takes a dip during adolescence but it increases during young adulthood (Tsai, Ying & Lee, 2001).

For over two decades, studies have extensively investigated the role of gender and age differences in individuals with respect to self-esteem. (Orth et al., 2012; Robins et al., 2002; Shaw et al., 2010; Trzeniewski et al., 2003; Twenge & Campbell, 2001). It has been consistently observed in the literature that males often have higher self-esteem than females. This significant difference between the two groups originates in adolescence, persists till adulthood, and declines in old age. (Kling et al., 1999; Robins et al., 2002; Zeigler et al., 2012). Gender differences can be partly attributed to universal biological mechanisms such as hormonal transitions and universal cultural systems such as “universal gender roles”. It is reported that meditation may reduce inner conflicts by promoting congruence between explicit and implicit self-esteem. (Koole et al., 2009).

One’s mental well-being is dynamic in nature as it varies through time and context. WHO (2004) defines mental well-being as a state “which allows individuals to realize their abilities, cope with the normal stresses of life, work productively and fruitfully, and make a contribution to their community.” Being mentally healthy and living well is important to everyone. According to Zollars et al. (2019), meditation can be one of the most efficient ways of managing mental well-being and improving the overall mental health of an individual.

Resilience is conceptualized as ‘to bounce or spring back’ from the stressors of daily life (Agnes, 2005). There is an alignment amongst scholars in appreciating that resilience varies in diverse contexts (Southwick et al., 2014). People with high resilience have characteristics like commitment, dynamism, optimism, patience, faith, and altruism. Pidgeon and Keye (2014) reported significant positive relationships between mindfulness and resilience in predicting the psychological wellbeing of university students. Practicing meditation enhances optimism, altruism, dynamism, and patience (Iwamoto et al., 2020; Perez-De-Albeniz & Holmes, 2000).

The rationale of the study

This study aims to examine the effects of SYM on

self-esteem, resilience, and mental well-being through a comparative approach between people who practice SYM and people who do not practice meditation. This study emphasizes Henderks (2014) suggestion of exploring positive mental health constructs of SYM on subjective well-being and resilience. Positive psychological research has clearly highlighted the importance of investigating factors that contribute to well-being. (Pepping et al., 2014). Through this study, we substantiate meditation as a factor greatly contributing to alleviating stress and enhancing mental well-being (Goyal et al., 2014). In this process, we also discuss positive outcomes, such as healthy self-esteem and resilience (Baer, Lykins & Peters, 2012).

Method

Hypotheses

1. There will be a significant relationship between SYM and resilience, self-esteem, and mental well-being.
2. There will be a significant difference between SYM and non-meditators in terms of resilience, self-esteem, and mental well-being.
3. There will be a significant difference between meditators and non-meditators in resilience, self-esteem, and mental well-being with respect to gender.

Research Design

The present study uses a quasi-experiment comparison of two independent groups; the SYM group and the control group, with a non-equivalent control group post-test-only design. The variables measured in the study are as follows: The independent variable is SYM and the dependent variables are self-esteem, resilience, and mental well-being.

Participants

A total sample of 91 young adults, both Sahaja Yoga meditators and non-meditators (44 meditators and 47 non-meditators), was taken from various urban parts of India. The age range of the sample was 20–34 years. The numbers of males and females in the meditation group were (19) and (24) respectively, whereas the numbers of males and females in the non-meditator group were (27) and (20) respectively. The participants were selected through convenient sampling. Participants were eligible to participate in the study if they had practiced Sahaja Yoga Meditation for at least a year and were not practicing any other kind of meditation. Participants were excluded from the study if they were practicing any kind of meditation or if they

84/ The Effect of Sahaja Yoga Meditation on Self-Esteem...

had been practicing SYM for less than a year.

Measures

Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965).

The 10-item scale measures global self-esteem (e.g., “Overall, I am satisfied with myself”). Responses are made on a 4-point scale from ‘strongly disagree’ to ‘strongly agree’, measuring both positive and negative feelings about oneself, and the scale is unidimensional.

Brief Resilience Scale (BRS) (Smith et al; 2008)

The BRS consists of six items, out of which three are positively worded, whereas three are negatively worded and reversely scored. The total score is obtained by finding the mean of all six items. The scores ranged from 5 to 30. It is a 5-point scale where the participants have to rate the statements from “strongly disagree” to “strongly agree”. The BRS measures the ability to bounce back or recover from stress. BRS demonstrated good internal consistency and test-retest reliability with a Cronbach’s alpha of 0.80.

The Warwick-Edinburgh Mental Well-being Scale (WEMWBS) (Brown, Plett, Tennant et al; 2007).

The WEMWBS was developed by the Universities of Warwick and Edinburgh to assess the mental well-being of adults in the UK. WeMWBS is a 14-item self-administered scale that has positively worded items and measures subjective well-being and psychological functioning and addresses aspects of positive mental health. The scale has a Likert scale from 1 to 5, and the total score is obtained by summing up all the scores. The minimum scores an individual can obtain on the scale is 14 and the maximum is 70. The items on the scale range from ‘none of the time’ to ‘all of the time’.

The WEMWBS has been validated for use with individuals 16 years and older in the UK (Tennant, 2007). It has also been validated among younger people (Clarke et. al., 2011) and other populations (Taggart et al., 2013). It has also been translated into many languages. The WEMWBS shows excellent internal consistency with a Cronbach’s alpha coefficient of 0.89. The test-retest reliability is 0.83. The scale has good content validity (Tennant et. al., 2007).

Procedure

The data was collected in an online mode. The Google forms consisting of a demographic questionnaire, the Rosenberg Self-Esteem Scale, the Brief Resilience Scale, and the Warwick-Edinburgh mental well-being scale were sent to the participants after obtaining informed consent and ensuring confidentiality.

Statistical Analysis

A descriptive analysis was used to compute the mean and standard deviation and to see the normalcy of the data. A Pearson product-moment correlation was used to understand the relationship between SYM and resilience, self-esteem, and mental well-being in both the meditators and the non-meditator group. A t-test was used to examine the difference between both groups with regard to resilience, self-esteem, and mental well-being.

Results

Table 1 presents the descriptive statistics of the questionnaires along with the t value among meditators and nonmeditators. The results reveal that scores on self-esteem, resilience, and mental well-being show statistically significant differences among both groups. Meditators had higher mean scores on self-esteem, resilience, and mental well-being than non-meditators.

Table 1
Descriptive statistics and t-test of self-esteem, resilience, and mental well-being among meditators and non-meditators

Variables	Sample	n	Mean	SD	t
Self - esteem	Meditators	44	33	3.69	4.97**
	Non-meditators	47	28.23	5.25	
Resilience	Meditators	44	3.71	0.48	4.63**
	Non- meditators	47	3.08	0.77	
Mental Well-being	Meditators	44	55.86	5.82	4.87*
	Non-meditators	47	47.48	9.89	

**p <0.01

Table 2 shows a correlation between the study variables among both groups. Reference to this table reveals that correlations were significant between self-esteem and resilience were significant among

meditators at 0.01 level, whereas correlations among all the three variables were significant in the non-mediator group at 0.01 level.

Table 2
Pearson Product Moment Correlation of the study variables

	<i>Meditators</i>			<i>Non-meditators</i>		
	<i>SE</i>	<i>RES</i>	<i>MWB</i>	<i>SE</i>	<i>RES</i>	<i>MWB</i>
<i>Self-esteem</i>	1	0.527**	0.082 NS	1	0.623**	0.677**
<i>Resilience</i>	0.527**	1	0.160 NS	0.623**	1	0.611**
<i>Mental Well-being</i>	0.082	0.160	1	0.677**	0.611**	1
	NS	NS				

***p* < 0.01, NS= Not Significant

Table 3 sets out the gender differences between males and females in the mediator group with respect to the study variables. There was no significant difference

found between males and females with reference to self-esteem, resilience, and mental well-being.

Table 3
***t*-test between males and females in the mediator group for the study variables**

Variables	Sample	Meditators			
		N	M	SD	<i>t</i>
Self - esteem	Female	24	33.29	3.49	0.57NS
	Male	19	32.63	4.08	
Resilience	Female	24	3.68	0.485	-0.7NS
	Male	19	3.79	0.480	
Mental Well-being	Female	24	56.54	5.52	0.52NS
	Male	19	55.63	5.79	

***p* < 0.01, NS= Not Significant

Table 4 displays the gender difference between males and females in the non-mediator group with respect to the study variables. The results indicate a

significant difference between the two groups in self-esteem. However, no significant difference was found in resilience and mental well-being between the groups.

Table 4

t-test between males and females in the non-mediator group for the study variables

Non - Meditators					
Variables	Sample	n	M	SD	<i>t</i>
Self - esteem	Female	20	26.30	6.07	-2.26**
	Male	27	29.66	4.11	
Resilience	Female	20	2.87	0.94	
	Male	27	3.23	0.58	-1.63NS
Mental Well-being	Female	20	44.55	12.14	-1.79
	Male	27	49.66	7.33	NS

***p* < 0.01, NS= Not Significant

Discussion

The aim of the present study was to explore the relationship between SYM, resilience, self-esteem, and mental well-being among SYM meditators and non-meditators. The results of our study found a significant positive association between self-esteem and resilience in the mediator and non-mediator groups. Bajaj (2017) and Brown, Ryan & Creswell, (2007) reported that the practice of mindfulness may aid individuals in recognizing their sense of self-worth, which might enhance resilience. High self-esteem, which is built on the “acceptance of self-traits” and elevated awareness, may result in firm resilience and a swift return to a state of balance in the face of stressors, which might result in stable levels of mental health.

We tried to understand the relationship between self-esteem and resilience with mental well-being. High self-esteem allows individuals to have a positive outlook on life and bounce back from stress, which contributes to the overall mental well-being of the individual (Jindal-Snape & Miller, 2010). However, the present study does not find a significant relationship between self-esteem and resilience with mental well-being in the mediator group. Unlike the non-mediator group, no

significant relationship was found between self-esteem, resilience, and mental well-being in the mediator’s group. The explanation for the above results may involve factors like one’s religious orientation (Joshi, Kumari & Jain, 2008) and their level of physical and recreational activity. These factors help in promoting psychological well-being, which was not considered in the present study. The present study provides salient findings by contradicting the results of Hendricks (2018) that SYM is associated with increased subjective well-being and psychological well-being.

Our study also sought to understand the level of self-esteem, resilience, and mental well-being among meditators and non-meditators. Significant mean differences were found between both groups with regard to self-esteem, resilience, and mental well-being. Practicing meditation is associated with increased mindfulness, which decreases rumination and fear of emotion and increases behavioral self-regulation that is significant to one’s mental well-being (Lykins & Baer, 2009). Hence, it is inferred that SYM has an impact on the mental well-being of young adults. Henkins (2014) explains that it helps in self-awareness and integrates thoughts and emotions, and thus individuals practicing SYM tend to bounce back easily

in a stressful situation because of which their overall mental well-being improves (Henderks,2014). Rogers (2013) indicates that meditation increases resilience among college students. That aligns with the findings of our study, which leads us to infer that meditation positively impacts the resilience of young adults.

This study also investigated the role of gender in impacting self-esteem, resilience, and mental well-being among meditators and non-meditators. The findings suggest a significant difference between male and female groups with regard to self-esteem in the non-mediator group. However, no significant difference was found in mental well-being and resilience. According to the mean scores, the male group was found to have higher scores on self-esteem compared to the female group. Gender is an important determinant of self-esteem. Similar to our findings, existing literature suggests that males significantly have higher self-esteem than females (Nupur, C., &Mahapatro, 2016; Srivastava & Aggarwal, 2013). The results of the study revealed that males have higher self-esteem than females (Bleidron et al., 2016).

In India, times have been changing with the female gender being vocal and expressive about the rights of the female community, but traces of patriarchy are still found in individuals, especially young adults. Even though people who identify as women have been opting for higher education and are being appointed to powerful positions, patriarchal practices still manage to creep in through gender socialization. (Ram et al., 2014). Since their childhood, males are encouraged to excel in sports, academics, and careers, whereas the female gender is constantly reminded of their feminine traits like emotional sensitivity and well-cultured as compared to men, which inculcates compliance and submission among the female gender (Bhardwaj & Agrawal, 2013; Ahmad et al., 2013). The development of positive self-evaluation can be biased due to conforming to the conventional feminine role. From the available literature on gender differences in self-views, it suggests that females are more reactive than males to reflected appraisals (Rosenberg, 1986).

An interesting finding that emerged was that there

was no significant difference between males and females in the mediator group in any of the variables. The findings of our study are contradictory to the conclusions found in the literature (Jung, 2007; Pandya, 2021; Rojani et al., 2017). This variation in results could be due to the practice of meditation, which enhances self-awareness and self-integration, and the individual starts looking at themselves as a “whole,” dissolving prior gender conditionings.

Limitations

This study has some limitations that are worth mentioning. In the present study, non-equivalent groups have been used. This study presents a cross-sectional design, therefore making it difficult to state causative relationships. Another limitation is that the results of this study are based on self-reported data by young adults, which may elicit socially desirable responses or deliberately falsified responses. This limitation can be overcome by using complementary measures to the self-reported questionnaires such as interviews or other sources of information. Future studies using longitudinal designs would help understand causal relationships. The size of the sample is small, and hence the results can't be generalized. Extraneous variables like socioeconomic status, religion, and physical and recreational activity were beyond the purview of this study, which could be considered in future research. Finally, these findings should be replicated in other cultural contexts and include comparisons with samples from different cultures to determine the cultural role in the relationship between these variables.

Conclusion

SYM can be an alternative form of meditation to enhance self-esteem, resilience, and mental well-being among young adults. The present research forms a valuable, though tentative, addition to the published literature already available on the therapeutic efficacy of meditation in general, and SYM in particular. SYM is an easy technique and can be practiced by anyone. It can be learned and has been practiced in more than 140 countries. According to the findings of this study, SYM has a significant effect on self-esteem, resilience, and mental well-being.

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90/ The Effect of Sahaja Yoga Meditation on Self-Esteem...

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